

# PATENT ASSIGNMENT

Electronic Version v1.1

Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
Glenn Petkovsek	07/16/1992

RECEIVING PARTY DATA	
Name:	USA IMAGES OF FLORIDA, LLC
Street Address:	4800 Hwy. A1A
City:	Vero Beach
State/Country:	FLORIDA
Postal Code:	32960

PROPERTY NUMBERS Total: 42

Property Type	Number
Patent Number:	5316208
Patent Number:	5411201
Patent Number:	5573277
Patent Number:	5626370
Patent Number:	5626286
Patent Number:	5697648
Patent Number:	6400829
Patent Number:	6089613
Patent Number:	5887904
Patent Number:	5860904
Patent Number:	5746450
Patent Number:	5890647
Patent Number:	5918802
Patent Number:	5848809
Patent Number:	6050603

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Patent Number:	5951053
Patent Number:	6071367
Patent Number:	5915730
Patent Number:	5967558
Patent Number:	6290262
Patent Number:	6388764
Patent Number:	5984365
Patent Number:	5950910
Patent Number:	6003902
Patent Number:	6136129
Patent Number:	6041999
Patent Number:	6047880
Patent Number:	6179334
Patent Number:	6241844
Patent Number:	6145884
Patent Number:	6120063
Patent Number:	6203068
Patent Number:	6962371
Patent Number:	6361077
Patent Number:	6676794
Patent Number:	6863310
Patent Number:	6371521
Patent Number:	6918615
Patent Number:	7493292
Patent Number:	5970458
Patent Number:	5507526
Patent Number:	5560185

#### CORRESPONDENCE DATA

Fax Number: 501-374-08

*Correspondence will be sent via US Mail when the fax attempt is unsuccessful.*

Phone: 501-374-0812

Email: shawna@unitedsystems.net

Correspondent Name: Glenn Petkovsek

Address Line 1: 1201 Main Street

Address Line 4: Little Rock, ARKANSAS 72202

Glenn Petkovsek

This document serves as an Oath/Declaration (37 CFR 1.63).

**Total Attachments: 2**

source=Articles of Incorporation#page1.tif

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**USA Images of Florida, LLC**

(Must end with the words "Limited Liability Company, "LLC," or "LLC.")

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

4800 Hwy. A1A  
#117  
Vero Beach, FL 32960

**Mailing Address:**

1201 Main Street  
Little Rock, AR 72202

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**  
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Glenn Petkovsek

Name

4800 Hwy. A1A #117

Florida street address (P.O. Box NOT acceptable)

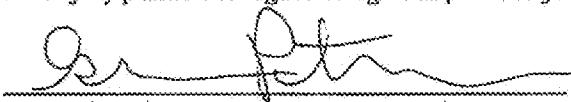
Vero Beach

FL 32960

City, State, and Zip

12 SEP 20 AM 11:46  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA  
**FILED**

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.*



Registered Agent's Signature (REQUIRED)

**(CONTINUED)**

Page 1 of 2

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Glenn Petkovsek

4800 Hwy. A1A #117

Vero Beach, FL 32960

MGRM

Marcha Cooper

4800 Hwy. A1A #117

Vero Beach, FL 32960

(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)**

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**



\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Glenn Petkovsek, Managing Member

Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation  
of Registered Agent  
\$ 38.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)

12 SEP 20 AM 11:46  
RECEIVED  
FLORIDA SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**FILED**